



PATENT
Old Attorney Docket: 066112.999A
New Attorney Docket: 031838.0006

#4/A
10-11-01
M.L.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application Of:)
Scott A. MOSKOWITZ et al) Group Art Unit: 2131
Application Number: 09/671,739) Examiner: To be assigned
Filed: September 29, 2000)
For: METHOD AND DEVICE FOR MONITORING AND ANALYZING SIGNALS

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PRELIMINARY AMENDMENT

Commissioner of Patents
Washington, D.C. 20231

Sir:

Prior to an examination on the merits, please ~~amend~~ the above-referenced patent application as follows:

IN THE CLAIMS:

Please add ~~new claims 49-61~~, as follows:

~~--49. The system of claim 1, wherein the abstract is created by:
determining invariant characteristics for the reference signal;
selecting the invariant characteristics that have a minimum variation with the stored abstracts in the reference database; and
defining a null case as a minimum variation from all stored abstracts in the reference database.~~

X
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Cn't

50. The method of claim 41, wherein the step of creating an abstract for a first digital signal comprises:

~~determining invariant characteristics for the first digital signal;~~

01/18/2001 HN00R1 00000057 09671739

01 FC:202
02 FC:203

40.00 DP
117.00 DP

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WASHINGTON, D.C. 20005

January 16, 2001

In re Patent Application of:

Scott A. MOSKOWITZ et al.

Application No.: 09/671,739

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Filed: September 29, 2000

Group Art Unit: 2131

Title: METHOD AND DEVICE FOR
MONITORING AND ANALYZING
SIGNALS

Examiner: Unassigned

Commissioner for Patents
Washington, D.C. 20231

Transmitted herewith is an amendment in the above-identified application. Fees have been calculated as shown below:

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Previously Paid For	Extra	Rate		Amount
				Large Entity	Small Entity	
Number of Claims in Excess of 20	62	48	13	\$ 18.00	\$ 9.00	\$ 117.00
Independent Claims in Excess of 3	5	4	1	\$ 80.00	\$ 40.00	\$40.00
First Presentation of Multiple Dependent Claims				\$ 270.00	\$ 135.00	\$ 0.00
Extension Fee:	a) One Month b) Two Months c) Three Months d) Four Months e) Five Months			\$ 110.00 \$ 390.00 \$ 890.00 \$1390.00 \$1890.00	\$ 55.00 \$ 195.00 \$ 445.00 \$ 695.00 \$ 945.00	\$ 0.00
Other:						\$ 0.00
TOTAL FEE DUE						\$157.00

No additional fee is required.
 A check in the amount of \$ 157.00 is attached.
 Charge \$ _____ to Deposit Account No. 50-1640.
 Charge any additional fees or credit any overpayment to Deposit Account No. 50-1640.

Small Entity Status Claim:
 is attached.
 is of record in this application.

Respectfully submitted,

By:


Floyd B. Chapman
Registration No. 40,555